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Commission on the Status of Women
Fifty-third session
2-13 March 2009
Item 3 (a) (i) of the provisional agenda*
Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twenty-first century": implementation of strategic objectives and action in critical areas of concern and further actions and initiatives: the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS

Statement submitted by Soroptimist International, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.6/2009/1.

08-64026 (E) 190109

Statement*

Soroptimist International is a vibrant, dynamic organisation for today's professional and business women. We are committed to a world where women and girls together achieve their individual and collective potential, realise aspirations and have an equal voice in creating strong, peaceful communities worldwide.

We have over 90,000 members, in 125 countries and territories around the world, who are inspiring action and creating opportunities to transform the life of women and girls through their global network of members and international partnerships. As a non-governmental organisation Soroptimist International is committed to playing its part as a Formal Partner with the World Health Organisation in the Joint United Nations Programme on HIV/AIDS-UNAIDS.

Soroptimist International recognises that all caring responsibility, including caregiving in the context of HIV/AIDS, should be of equal responsibility between women and men. Millennium Development Goal 3, promoting gender equality and empowerment of women, is a particular focus of our organisation. Our own Programme Focus Objectives include 'Eliminate poverty and gender discrimination through ensuring women's full social and economic rights' and 'Support programmes and policies that eliminate HIV/AIDS'.

Through programmes of service Soroptimist International members and clubs advocate, and have developed and supported work, to promote this cause worldwide in activities such as:

- Project Sierra: A Family and a Future is a partnership between Soroptimist International and Hope and Homes for Children focussing on Sierra Leone. It is designed to support families headed by children, young women and ageing grandparents. The aim is to provide adequate resources, education, training and small business and life skills. This enables caregiving in a post-conflict and AIDS-affected country.

- Many clubs are working with UNICEF in their 'Born Free' campaign. Members are raising funds in many ways to enable HIV-affected women to have babies free from HIV. The funds-raised resources care for the women, their babies and their future.

- Clubs, particularly in Africa, are working with communities, schools and orphanages giving support in many ways to promote positive care for vulnerable children- especially those affected by HIV/AIDS. Educational resources, clothes, cooking utensils and play equipment are provided. Members also give their time and expertise to care, train and educate the children and their mothers.

- Many clubs have links across the world and resources to fund caregiving in HIV/AIDS projects are supported both by partnering with SI 'friendship clubs' and other Service Organisations.

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* Issued without formal editing.

Soroptimist International recognizes that there are initiatives in which equal sharing of responsibility between women and men, especially caregiving in the HIV/AIDS context is integral. We urge Governments and members of civil society to join with us and increase our collective efforts to:

- Ensure equal access to resources which are available to caregivers in all circumstances.
- Provide, and ensure equal access to, adequate resources to support both HIV/AIDS victims and their carers.
- Provide education programmes, especially for teenage boys and girls in schools, highlighting the disease, its consequences and the responsibilities of caregiving within the family.
- Resource major efforts to research, treatment development and caregiving, making certain that women are equal partners in all discussions and decisions made.
- Provide care facilities to all HIV/AIDS patients, ensuring equal standards and dignity to both men and women.
- Ensure that child, and grandparent headed-households, have resources and support available to them to enable children to continue their education.
- To support UNAIDS programmes and projects with financial resources and activities.
- Support work furthering gender equality and equity especially in the field of caregiving.

Our Members network with Governments, non-governmental, voluntary and all other appropriate bodies to encourage inter-agency collaboration and co-operation, in recognition that only global programmes will be truly effective in changing attitudes and releasing resources needed to enable equal sharing in responsibility of caregiving to be a reality.

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Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

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Statement*

The International Planned Parenthood Federation (IPPF) welcomes the priority theme of the fifty-third session of the Commission on the Status of Women (CSW) on 'the equal sharing of responsibilities between women and men, including caregiving in the context of HIV/AIDS'. There are a number of challenges related to this theme.

Women and girls bear a disproportionate burden of care, including in terms of domestic responsibilities involving child care, cooking, cleaning, collecting water or fuel (in rural areas), and other duties. Unpaid domestic labour and health care are clear examples of unequal sharing of responsibilities between men and women, felt across all countries and cultures, and contributes significantly to poverty.

Domestic responsibilities can result in girls and women being denied access to education and employment and prevent their full participation in the public sphere, especially in decision-making fora and governance. When a girl is prevented from attending school, her ability to participate meaningfully in the formal economy and in decision-making fora as an adult is compromised. When men and women both contribute to household responsibilities, women have time to engage in paid work and as a result, control over household income is shared more equally.

The importance of women's participation in social, economic and human development, and the benefits of their involvement are well documented. As noted in Paragraph 51 of the Beijing Declaration and Platform for Action, "Women's poverty is directly related to the absence of economic opportunities and autonomy, lack of access to economic resources, including credit, land ownership and inheritance, lack of access to education and support services and their minimal participation in the decision-making process."

Because most unremunerated work takes place within the home, women who undertake such work can become isolated and vulnerable to physical, emotional and/or sexual abuse. Sharing domestic responsibilities more equally between men and women is therefore an important means by which to improve the health and well-being of women and girls.

A woman's ability to participate in development is undermined by domestic responsibilities. There is a rise in the number of female-headed households and those headed by elder children (often daughters). This often occurs when parents or other primary caregivers, particularly older women relatives (especially grandmothers) die. Relatives, neighbours and friends may also leave children behind, especially in the context of HIV and AIDS. As highlighted in the DAW online discussion, women are burdened with domestic responsibilities, including care-giving, throughout their entire lives. We must address ways to support girls and women who are the head of their household to ensure that they and their families can access education and employment and participate in the public sphere. A major challenge is to build societies and cultures that encourage men to become involved in unpaid domestic labour, including the provision of care.

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It is widely acknowledged that women and girls provide the majority of care to individuals who are living with HIV. Caring for people living with HIV and AIDS can be a substantial responsibility that should be borne by the State. The failure of Governments to provide essential health care and services thus results in additional domestic burdens for women and girls. It should be recognized that this care work, and the costs involved for those who undertake it, is not recognized by Governments in national accounts, and similarly, is unaccounted for in national and international HIV and AIDS policy and programming.

Stigma and discrimination also present barriers to the provision of HIV and AIDS services. Men and women have different experiences of stigma and are discriminated against in different ways which need to be recognized and addressed. Women are more likely to seek health care earlier than men (due to, for example, antenatal testing) and therefore are informed of their HIV status earlier than men, often times through mandatory testing, which should also be addressed. As such, far fewer HIV-positive men and boys seek support or understand how to care for themselves and others. This supports the unequal sharing of responsibilities between women and men, and perpetuates an environment in which HIV-positive women are discriminated against, disinherited and subjected to violence by their male partners. It is vital to increase awareness of HIV and AIDS among men and boys, increase voluntary counselling and testing services so that the number of boys and men who know their status increases, and can therefore take part in caring for themselves and/or others who are HIV positive.

Another challenge is that sexual and reproductive health providers do not always actively promote shared responsibility between men and women as part of strategies for pre- and post-counselling or as part of ongoing support strategies for those living with HIV and AIDS. As such the opportunity to involve men in caring for those living with HIV is often missed. This lost opportunity is compounded by the lack of services specifically targeted at men and boys that promotes care giving, provides information and/or support and addresses specific care needs of people living with HIV.

Challenges are also evident at the policy level. Most countries lack an effective policy framework to support those in need of HIV care. In addition, employment and parental leave policies rarely support men who wish to take time off from work to care for their families. Men are often discouraged from acting as carers because they are effectively financially penalized by staying at home to provide care. Women and girls are deprived of a number of their human rights whilst engaging in the full-time care and support of those infected or affected by HIV and AIDS, including lack of access to inheritance and property rights, education, and health. Therefore, States must address and implement particular policies that address the related factors of poverty, development, democracy and equitable distribution of aid as these affect gender equality and women's empowerment.

IPPF encourages Member States to uphold their commitments made during the 2001 Declaration of Commitment on HIV/AIDS, as well as the Political Declaration of 2005, where it recognized that the vulnerability of women, girls and adolescents to HIV/AIDS is increased by their unequal legal, economic and social status, including poverty, as well as takes into account the fact that the pandemic reinforces gender inequalities, that women and girls are disproportionately affected by the HIV/AIDS

crisis, that they are more easily infected, and that they bear the disproportionate burden of care for and support to those infected and affected, becoming more vulnerable to poverty as a result.

Recommendations

To address these challenges it is important to act on both the causes and consequences of the unequal sharing of responsibilities between women and men. IPPF therefore calls on Member States of the United Nations to heed the following recommendations.

Address individuals, households and communities

Action is required because gender inequality is reinforced by social norms and structures. Both women and men need the skills and awareness to build an equitable society to improve people's health and well-being. It is therefore necessary to:

- Develop educational interventions (formal and informal) that are based on human rights and imbued with the principle of gender equality. These interventions must be supported by policies and laws.

- Improve quality of care by promoting the equal involvement of men and women; interventions must encourage joint decision-making and shared responsibility.

Increase educational opportunities

Limited educational opportunities for girls and women often prevent their participation in social, economic, and political life. To address this, Governments must:

- Adopt enabling mechanisms that support girls' full and continued participation in education, including for those who have been forced to abandon study to care for family members living with HIV.

- Implement mandatory comprehensive sexuality education programmes in schools to promote skills and knowledge about equitable relationships and shared responsibility.

Promote gender equity through social services

Social services, including health and educational services, must incorporate gender equality as a basic principle. This will promote sharing of responsibilities between women and men. Such services must:

- Promote shared responsibility among partners where one or more family members is HIV positive. When providing HIV tests, service providers should reach out to the person's sexual partners to encourage testing.

- Provide support, education and information to men and boys that promote the role of responsible parenting in improving family health and development.

- Develop and implement public health campaigns that target stigma and discrimination related to HIV and AIDS. These campaigns must inform and involve male partners.

- Provide support and counselling services that facilitate the greater sharing of responsibilities between men and women.

- Provide services that specifically address the sexual and reproductive health needs of women and men, and in particular those living with HIV.

Implement policies that support gender equality

Recommendations for action need to be carried out by Governments and decision-makers at the policy level:

- Implement social protection measures that protect women from the burden of care inequities. Such mechanisms should seek to protect those most vulnerable, reduce poverty and support women to earn an income.

- Ensure that social insurance systems allow and encourage the provision of care by men as well as women.

- Recognize the contribution of unremunerated work to the economy in national accounts.

- Develop initiatives that give greater value to the provision of care as a profession and encourage men to enter caregiving as a profession. This would necessitate increased financial remuneration by employers and greater recognition of unremunerated carers.

- Support women home-based carers and allow for their full participation in political and social and economic environments. Such assistance would include affordable and accessible health services, including sexual and reproductive health.

- Policies, laws and development frameworks need to be established that encourage men and boys to play a greater role in HIV care and support.

- Ensure that all health care-related policy interventions target families, recognizing that various family structures exist.

- Offer financial support for caregivers and actively encourage the participation of women in the political process to help negate gender stereotyping. This requires advocacy and education aimed at raising women's direct participation in the political process.

- Link care to a range of opportunities for economic empowerment, especially for young people.

- Encourage employers to enact more flexible working provisions for both men and women as this is a major barrier to the equal sharing of responsibilities.

- Rapidly scale up access to treatment programmes to prevent mother-to-child transmission of HIV and to encourage men to participate with women in programmes designed to prevent mother-to-child transmission; to encourage women and girls to participate in these programmes; and to provide sustained treatment and care for the mother after pregnancy (PMTCT+) and care and support for their family.

Improve evidence-based research

- Evidence-based research and data that highlight how the increased involvement of men and boys in care work leads to improved health outcomes must be collated. This must include the gathering of sex-disaggregated data that highlights the gender dimension of care work and the differences between the non-remunerated and remunerated work of women and men.